

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)

BYRON, MAURA, , ,

Mailing Address 57 SUMMITCREST

City

TRABUCO CANYON

State

CA

Zip Code

92679

FEC ID number of contributing
federal political committee.

C

Name of Employer

FAMILY SUPPORT NETWORK

Occupation

EXECUTIVE DIRECTOR

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Transaction ID : SA17A.247671

Date of Receipt

04 / **29** / **2020**

EARMARKED THROUGH WINRED [SA17A.4807]

Amount of Each Receipt this Period

100.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)

BYRON, MAURA, , ,

Mailing Address 57 SUMMITCREST

City

TRABUCO CANYON

State

CA

Zip Code

92679

FEC ID number of contributing
federal political committee.

C

Name of Employer

FAMILY SUPPORT NETWORK

Occupation

EXECUTIVE DIRECTOR

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Transaction ID : SA17A.247672

Date of Receipt

04 / **29** / **2020**

EARMARKED THROUGH WINRED [SA17A.4807]

Amount of Each Receipt this Period

100.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)

CABAJ, LINDA, , ,

Mailing Address 5069 GOODWILL RD

City

TOLEDO

State

OH

Zip Code

43613

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10.00

Transaction ID : SA17A.357568

Date of Receipt

04 / **13** / **2020**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

210.00

Total This Period (last page this line number only)